



Request for Information – Response
October 16, 2020

TO: Texas House Committee on Public Health
PublicHealth@house.texas.gov

FROM: Lee Johnson, MPA
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RE: Request for Information (RFI) Response for Interim Charge 1 – Due October 16th

Related to Controlled Substances/Opioids

HB 3285, which creates programs and initiatives to prevent and respond to opioid addiction, misuse, abuse, and overdose and identify and treat co-occurring substance use disorders and mental illness. Monitor the process by which the Governor's Criminal Justice Division will award grants to law enforcement agencies for opioid antagonists. Conduct oversight of the process related to Medicaid reimbursement for medication-assisted treatment. Examine the impact of the opioid crisis on Texas' seniors, and review any programs and services available to prevent and treat opioid misuse among that population.

The Texas Council represents the 39 Community Mental Health Centers (Centers) throughout Texas statutorily authorized to coordinate, provide, and manage community-based services for persons with serious mental illness and substance addictions. In many areas of the state Centers are known as Local Mental Health Authorities (LMHAs) or Local Behavioral Health Authorities (LBHAs).

Initiatives to identify and treat co-occurring substance use disorders and mental illness

Texas Implements CCBHC

Initially authorized by the United States Congress in 2014, the Excellence in Mental Health and Addiction Act (2014) established a federal definition and criteria for Certified Community Behavioral Health Clinics.¹ Recognizing an emerging value-based model for delivering comprehensive mental health and substance use disorder service for individuals with complex needs the Texas Legislature directed the state Health and Human Services (HHS) agency to pursue CCBHC as an option for Texas.

Recognizing alignment of the model with the state's behavioral health strategic plan, Texas HHS is moving forward to ensure statewide access to comprehensive CCBHC services. As the Delivery System

Reform Incentive Program (DSRIP) comes to a close in October 2021, this approach to behavioral health service delivery has also been identified as a key strategy to sustain the accomplishments in mental health and substance addiction services afforded by the 1115 Waiver.

There are nineteen (19) certified Centers and all thirty-nine (39) are expected to achieve certification by July 2021. This model of care is particularly important when it comes to treating individuals with co-occurring substance use disorders and mental illness.

Addiction treatment is a core component of CCBHCs' required service array. Because of the CCBHC program, participating Centers have enhanced addiction treatment services available to clients with co-occurring mental health conditions and substance addiction. As a result, CCBHCs have increased the number of patients with addictions they serve, by improving screening protocols to identify at risk use and addiction among existing clients.

Many CCBHCs have adopted MAT, a highly effective addiction treatment method that combines the use of medications with cognitive and behavioral therapies. MAT is the gold standard for opioid addiction treatment. Addiction treatment is a core component of CCBHCs' required service array.

Because of the CCBHC program, participating clinics have implemented major expansions of the addiction treatment services available to all community members. As a result, nearly all CCBHCs have increased the number of patients with addictions they serve, either by taking on new patients, improving screening protocols to identify at risk use and addiction among existing patients or both. Many CCBHCs have adopted MAT, a highly effective addiction treatment method that combines the use of medications with cognitive and behavioral therapies. MAT is the gold standard for opioid addiction treatment.